

TRANSCRIPT ORDER

DUE DATE:

Please Read Instructions:

1. NAME Andrew Entwistle		2. PHONE NUMBER (212) 894-7212		3. DATE 9/16/2019	
4. DELIVERY ADDRESS OR EMAIL aentwistle@entwistle-law.com, ncasey@entwistle-law.com		5. CITY		6. STATE	7. ZIP CODE
8. CASE NUMBER 19-33694	9. JUDGE David R. Jones	DATES OF PROCEEDINGS			
		10. FROM 9/11/2019	11. TO 9/11/2019		
12. CASE NAME Weatherford International plc, et al.		LOCATION OF PROCEEDINGS			
		13. CITY Houston	14. STATE TX		
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input checked="" type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	

16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)			
<input type="checkbox"/> OPINION OF COURT			
<input type="checkbox"/> JURY INSTRUCTIONS		<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING		Entire Hearing	9/11/2019
<input type="checkbox"/> BAIL HEARING			

17. ORDER

CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
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3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
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REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			

CERTIFICATION (18. & 19.)

By signing below, I certify that I will pay all charges
(deposit plus additional).

ESTIMATE TOTAL

0.00

18. SIGNATURE /s/ Andrew Entwistle			PROCESSED BY	
19. DATE 9/16/2019			PHONE NUMBER	
TRANSCRIPT TO BE PREPARED BY			COURT ADDRESS	
	DATE	BY		
ORDER RECEIVED				
DEPOSIT PAID			DEPOSIT PAID	
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00

DISTRIBUTION:

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TRANSCRIPTION COPY

ORDER RECEIPT

ORDER COPY